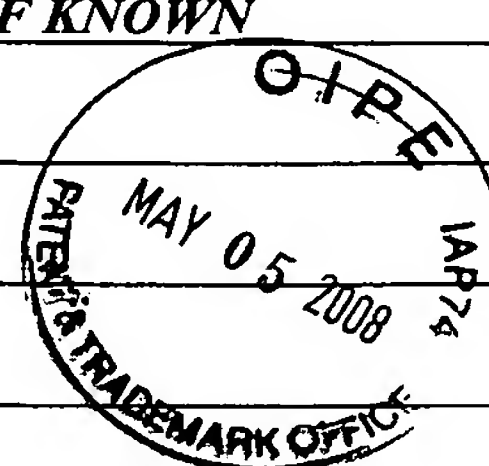


DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	21567
	First Named Inventor	Min K. Park
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	



As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTITUTED TRIAZOLES AS SODIUM CHANNEL BLOCKERS

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

☐ OR

☐ is attached hereto

☐ OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/518,890	11/10/2003	21567PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☒ Practitioners Associated with the Customer Number **000210**
OR
☐ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number


Direct all correspondence to: ☒ Customer Number **000210**

Name	Mitul I. Desai				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-3190	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Min K.	Park

Inventor's Signature		Date	5-11-06
----------------------	--	------	---------

Residence: City	Whippany	State	NJ	Country	US	Citizenship	Korea
-----------------	----------	-------	----	---------	----	-------------	-------

Mailing Address	Merck & Co., Inc. P.O. Box 2000				
-----------------	---------------------------------	--	--	--	--

City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
------	--------	-------	----	-----	------------	---------	--------

☒ Additional inventors are being named on the 3 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Prasun K.				Chakravarty			
Inventor's Signature	<i>Prasun K. Chakravarty</i>				Date	<i>May 5, 2006</i>	
Residence: City	Edison	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Bishan				Zhou			
Inventor's Signature					Date		
Residence: City	Hoboken	State	NJ	Country	US	Citizenship	P.R. China
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Edward				Gonzalez			
Inventor's Signature	<i>Edward Gonzalez</i>				Date	<i>5/15/06</i>	
Residence: City	Iselin	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Hyun				Ok			
Inventor's Signature	<i>Hyun Ok</i>				Date	<i>May 5th, 2006</i>	
Residence: City	Colonia	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.

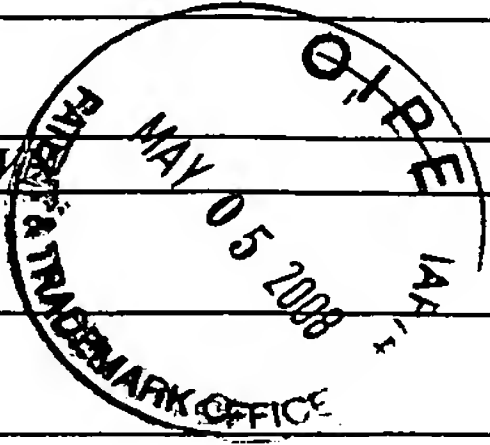
DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Brenda				Palucki			
Inventor's Signature	<i>Brenda L Palucki</i>			Date	May 11, 2006		
Residence: City	Hillsborough	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
William H.				Parsons			
Inventor's Signature				Date			
Residence: City	Belle Mead	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Rosemary				Sisco			
Inventor's Signature				Date			
Residence: City	Old Bridge	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		ZIP		Country	

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Michael H.				Fisher			
Inventor's Signature						Date	
Residence: City	Ringoes	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City	Rahway	State	NJ	ZIP	07065-0907	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City	Rahway	State	NJ	ZIP	07065-0907	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City	Rahway	State	NJ	ZIP	07065-0907	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City	Rahway	State	NJ	ZIP	07065-0907	Country	

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	21567
	First Named Inventor	Min K. Park
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	



As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTITUTED TRIAZOLES AS SODIUM CHANNEL BLOCKERS

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

☐ OR

☐ is attached hereto

☐ OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/518,890	11/10/2003	21567PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☒ Practitioners Associated with the Customer Number **000210**
OR
☐ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number

Direct all correspondence to: ☒ Customer Number **000210**

Name	Mitul I. Desai				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-3190	Fax	(732)594-4720

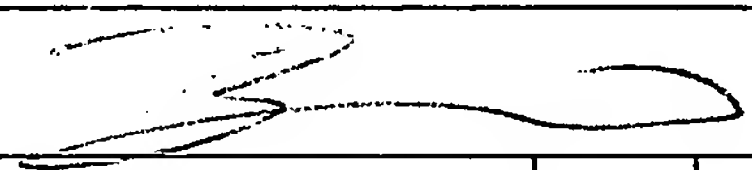
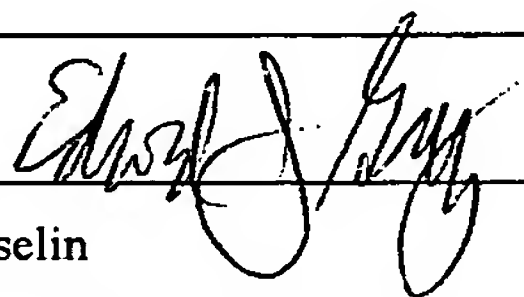
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname			
Min K.		Park			
Inventor's Signature				Date	
Residence: City	Whippany	State	NJ	Country	US
				Citizenship	Korea
Mailing Address	Merck & Co., Inc. P.O. Box 2000				
City	Rahway	State	NJ	ZIP	07065-0907
				Country	U.S.A.

☒ Additional inventors are being named on the 3 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION AND POWER OF ATTORNEY	ADDITIONAL INVENTOR(S) Supplemental Sheet
--	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Prasun K.				Chakravarty			
Inventor's Signature					Date		
Residence: City	Edison	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Bishan				Zhou			
Inventor's Signature					Date	May 09, 2006	
Residence: City	Hoboken	State	NJ	Country	US	Citizenship	P.R. China
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Edward				Gonzalez			
Inventor's Signature					Date	5/15/06	
Residence: City	Iselin	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Hyun				Ok			
Inventor's Signature					Date		
Residence: City	Colonia	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.

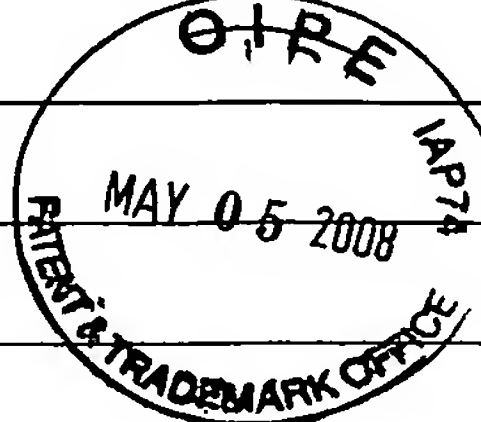
DECLARATION AND POWER OF ATTORNEY	ADDITIONAL INVENTOR(S) Supplemental Sheet
--	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Brenda				Palucki					
Inventor's Signature					Date				
Residence: City		Hillsborough		State NJ		Country US		Citizenship US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000							
City		Rahway		State NJ		ZIP 07065-0907		Country U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
William H.				Parsons					
Inventor's Signature					Date				
Residence: City		Belle Mead		State NJ		Country US		Citizenship US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000							
City		Rahway		State NJ		ZIP 07065-0907		Country U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Rosemary				Sisco					
Inventor's Signature					Date				
Residence: City		Old Bridge		State NJ		Country US		Citizenship US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000							
City		Rahway		State NJ		ZIP 07065-0907		Country U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature					Date				
Residence: City				State		Country		Citizenship	
Mailing Address									
City				State		ZIP		Country	

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Michael H.				Fisher					
Inventor's Signature						Date			
Residence: City		Ringoes		State NJ		Country US		Citizenship US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000							
City		Rahway		State NJ		ZIP 07065-0907		Country U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	21567
	First Named Inventor	Min K. Park
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	



As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTITUTED TRIAZOLES AS SODIUM CHANNEL BLOCKERS

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/518,890	11/10/2003	21567PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☒ Practitioners Associated with the Customer Number **000210**
OR
☐ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number

Direct all correspondence to: ☒ Customer Number **000210**

Name	Mitul I. Desai				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-3190	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Min K.	Park

Inventor's Signature	Date
----------------------	------

Residence: City	Whippany	State	NJ	Country	US	Citizenship	Korea
-----------------	----------	-------	----	---------	----	-------------	-------

Mailing Address	Merck & Co., Inc. P.O. Box 2000				
-----------------	---------------------------------	--	--	--	--


City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
------	--------	-------	----	-----	------------	---------	--------

☒ Additional inventors are being named on the 3 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname				
Prasun K.			Chakravarty				
Inventor's Signature					Date		
Residence: City	Edison	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname				
Bishan			Zhou				
Inventor's Signature					Date		
Residence: City	Hoboken	State	NJ	Country	US	Citizenship	P.R. China
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname				
Edward			Gonzalez				
Inventor's Signature					Date		
Residence: City	Iselin	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:			<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname				
Hyun			Ok				
Inventor's Signature					Date		
Residence: City	Colonia	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.

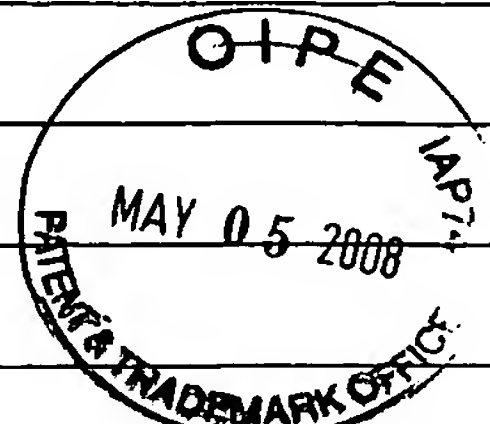
DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Brenda				Palucki			
Inventor's Signature				Date			
Residence: City		Hillsborough		State NJ		Country US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	
Country		U.S.A.					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
William H.				Parsons			
Inventor's Signature				Date		May 8, 2006	
Residence: City		Belle Mead		State NJ		Country US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	
Country		U.S.A.					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Rosemary				Sisco			
Inventor's Signature				Date			
Residence: City		Old Bridge		State NJ		Country US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000					
City		Rahway		State NJ		ZIP 07065-0907	
Country		U.S.A.					
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City				State		Country	
Mailing Address							
City				State		Country	

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Michael H.				Fisher					
Inventor's Signature						Date			
Residence: City		Ringoes		State NJ		Country US		Citizenship US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000							
City		Rahway		State NJ		ZIP 07065-0907		Country U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	21567
	First Named Inventor	Min K. Park
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	



As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTITUTED TRIAZOLES AS SODIUM CHANNEL BLOCKERS

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/518,890	11/10/2003	21567PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☒ Practitioners Associated with the Customer Number **000210**
OR
☐ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number

Direct all correspondence to: ☒ Customer Number **000210**

Name	Mitul I. Desai				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-3190	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname			
Min K.		Park			
Inventor's Signature				Date	
Residence: City	Whippany	State	NJ	Country	US
				Citizenship	Korea
Mailing Address	Merck & Co., Inc. P.O. Box 2000				
City	Rahway	State	NJ	ZIP	07065-0907
				Country	U.S.A.

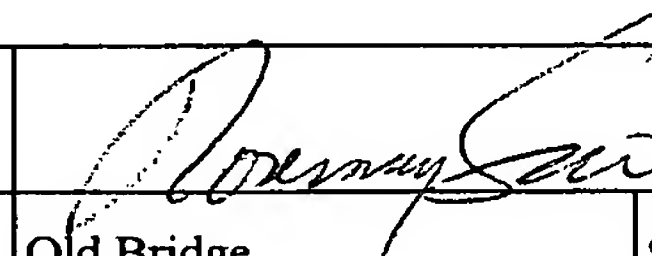
☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION AND POWER OF ATTORNEY	ADDITIONAL INVENTOR(S) Supplemental Sheet
--	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Prasun K.				Chakravarty			
Inventor's Signature						Date	
Residence: City	Edison	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Bishan				Zhou			
Inventor's Signature						Date	
Residence: City	Hoboken	State	NJ	Country	US	Citizenship	P.R. China
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Edward				Gonzalez			
Inventor's Signature						Date	
Residence: City	Iselin	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Hyun				Ok			
Inventor's Signature						Date	
Residence: City	Colonia	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.

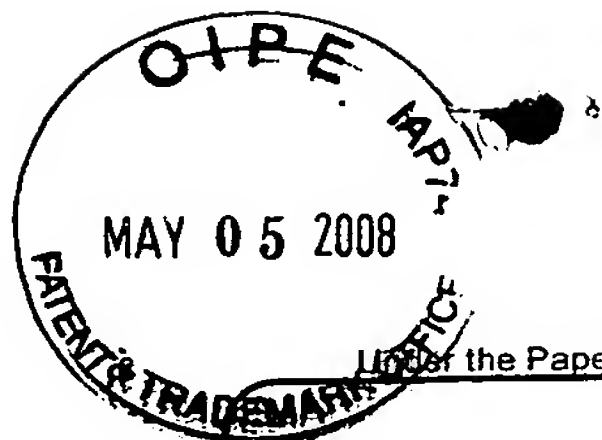
DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Brenda				Palucki			
Inventor's Signature						Date	
Residence: City	Hillsborough	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
William H.				Parsons			
Inventor's Signature						Date	
Residence: City	Belle Mead	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Rosemary				Sisco			
Inventor's Signature						Date	5 May 06
Residence: City	Old Bridge	State	NJ	Country	US	Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		ZIP		Country	

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Michael H.				Fisher					
Inventor's Signature						Date			
Residence: City		Ringoes		State NJ		Country US		Citizenship US	
Mailing Address		Merck & Co., Inc. P.O. Box 2000							
City		Rahway		State NJ		ZIP 07065-0907		Country U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City		Rahway		State NJ		ZIP 07065-0907		Country	

**DECLARATION Supplemental Sheet****For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor**Enter Deceased or Incapacitated Inventor's Name Michael H. FisherPage 6 of 6

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Louis L.		Zuegner III	
Legal Representative's Signature		Date 9/15/05	
Residence: City	Flemington	State	NJ
		Country	USA
Citizenship USA			
Mailing Address 28 Spring Street			
Mailing Address			
City	Flemington	State	NJ
		Zip	08822
		Country	USA
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Legal Representative's Signature			
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Legal Representative, if any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Legal Representative's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.